### RETURNED RECORD REQUEST

## **CONSOLIDATED CITY OF JACKSONVILLE**



8748

JACKSONVILLE SHERIFF'S OFFICE

| DATE:   | 12/17/2012  |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|
| We ar<br>below:   | re unable to respond to your request for copies of records for the reason(s) checked  |  |  |  |  |  |  |
| Ą   | NO REPORT ON FILE THIS AGENCY DOES NOT USE DROWES   |  |  |  |  |  |  |
|   | A report was not found with the name, date, location or CCR number included in your request, or the report has been purged in compliance with the State of Florida Record Retention Schedule. If you have additional information, please resubmit your request and another records search will be conducted.  |  |  |  |  |  |  |
|   | EXEMPT INFORMATION  |  |  |  |  |  |  |
| The requested record is exempt from the Florida Public Records Law pursuant to Flo State Statute 119.07(3), and release is prohibited at this time. |   |  |  |  |  |  |  |
|   | ☐ ACTIVE CRIMINAL INVESTIGATION ☐ JUVENILE INFORMATION  |  |  |  |  |  |  |
|   | OTHER (describe)  |  |  |  |  |  |  |
| ☐ INSUFFICIENT FEE  |   |  |  |  |  |  |  |
|   | Fees for record copies must be paid in advance, unless a charge account has been established with the Records Section of the Jacksonville Sheriff's Office. Your request is being returned due to insufficient payment. The cost for the record(s) requested is \$ . Company checks or money orders are to be made payable to the City of Jacksonville. PERSONAL CHECKS ARE NOT ACCEPTED. Florida law does not require that copies of public records be provided free of charge for indigent persons. |  |  |  |  |  |  |
|   | IMPROPER PAYEE  |  |  |  |  |  |  |
|   | All drafts, money orders, or checks must be made payable to the City of Jacksonville.   |  |  |  |  |  |  |
|   | OTHER AGENCY  |  |  |  |  |  |  |
|   | Initial or additional information regarding vehicle crashes may be obtained by contacting the Department of Highway Safety and Motor Vehicles, Bureau of Records, 2900 Apalachee Parkway, Tallahassee, FL 32399, 1-850-617-3416 or by contacting the local Florida Highway Patrol Unit at 904-695-4115.   |  |  |  |  |  |  |
| This re   | quest was processed by  |  |  |  |  |  |  |
| Name  | A.S. Holbert-68374  |  |  |  |  |  |  |
|   | 904, 630-2196 Ext. 66-00  |  |  |  |  |  |  |

# **PUBLIC RECORDS REQUEST**

8745

| OFFICE OF T  | HE SHERIE  | F                   |                        |                                | Committee Commit |                   |                         |                                 |                                       | nen.                                   |  |
|--|--|---------------------|------------------------|--------------------------------|--|-------------------|-------------------------|---------------------------------|---------------------------------------|--|--|
| City of Jacksonville   | OFFICE OF THE SHERIFF City of Jacksonville   |                     |                        |                                |  |                   |                         |                                 |                                       |  |  |
| Pursuant to  | Florida Statut   | e 119, no           | n-criminal j           | ustice age                     | ncies or   | entities          | reque                   | sting                           | - ast                                 | fg:                                    |  |
| informati  | on are NOT re  | quired to           | provide thi            | s informat                     | ion or s   | ubmit a r         | eques                   | t in wri                        | ting.                                 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |  |
| CCR:   | Providing detailed encoifies may reduce research time and provide more accurate results. |                     |                        |                                |  |                   |                         |                                 |                                       |  |  |
| REQUESTOR  | SAO   Na   | SAO   Name:         |                        |                                | DATE OF REQUEST  |                   |                         | DATE NEEDED                     |                                       |  |  |
| NAME   | Refused  | Jso                 |                        | ate Attorney                   |  | 3/2012            |                         |                                 |                                       |  |  |
| SHAWN M  | USGRAVE  | Business            | ☐ Put                  | olic Defender                  |  | IOW REC           | EIVE                    |                                 |                                       | 63                                     |  |
| PHONE NUMBER (S)   |  | Other agency Public |                        |                                | E-mail<br>Mail   |                   |                         | ☐ Telephone ☐ JSO Initiated     |                                       |  |  |
| (1)  | Media (Which?)   |                     |                        |                                |  |                   |                         |                                 |                                       |  |  |
| (2)  |  | Other M             | UCKRUCK                | NEWS                           | ☐ Cou  | nter/In Pers      | STATE                   | 20-00-00 Car                    | ZIP                                   | 15                                     |  |
| ADDRESS (IF REQUEST  | r is mailed) or JSC  | UNII                |                        | CITY                           |  | Jax, FL           | SIAIL                   |                                 |                                       |  |  |
| NOTICE: Requests for record<br>that is exempt from disclosure<br>record. Investigative records a | nursuant to law the custo  | odian will delete o | or excise that portion | of the record to w             | nich the exem  | iption applies an | a record o<br>d produce | r page thereo<br>for inspection | f contains informa<br>the remainder o | tion<br>f the                          |  |
| INCIDENT INFOR   |  |                     | 民國學別推進                 |                                | Date Occurred  |                   |                         | Time Occurred                   |                                       |  |  |
| Officer Name(s)  |  |                     |                        |                                |  |                   |                         |                                 |                                       |  |  |
| Incident Location  |  |                     |                        |                                | Additional CCRs:   |                   |                         |                                 |                                       |  |  |
| SUSPECT INFOR  | MATION   | THE REPORT OF       |                        |                                |  |                   |                         | CAN                             | STATE OF N                            | IA                                     |  |
| Name   |  |                     |                        | Date of Arres                  | st   | Jail #            |                         | SA#                             |                                       |  |  |
| Race   | Sex  | □м [                | ] F                    | DOB                            |  |                   | Age                     |                                 |                                       |  |  |
| COMMUNICATIO   | NS REQUEST   |                     | □ N/A                  | CORREC                         | TIONS  | REQUEST           |                         |                                 |                                       | /A                                     |  |
| Audio Recording  |  | rsation             |                        | ☐ Visitatio                    |  |                   | increase.               |                                 |                                       |  |  |
| Call History Print   | out  | 10.00               |                        | ☐ Audio – Telephone Recordings |  |                   |                         |                                 |                                       |  |  |
| MDC History Printout (Officer's Name, ID#)   |  |                     |                        | ☐ Video Recordings             |  |                   |                         |                                 |                                       |  |  |
| AVL Printout (Ra   | dio ID )   |                     |                        | ☐ Inmate Photographs           |  |                   |                         |                                 |                                       |  |  |
| Audio Recording  |  | Other (describe)    |                        |                                |  |                   |                         |                                 |                                       |  |  |
| Approx. Start Time   | How Long   | Radio 1             | alk Groups             |                                |  |                   |                         |                                 |                                       |  |  |
| PERSONNEL RE   | CORDS REQU   | EST                 | J. Commercial St.      | <b>第一种电影</b>                   |  |                   | Velle                   | <b>阿基地區</b>                     |                                       | 4                                      |  |
| I LINCOMNEE HE   |  |                     | Employee ID            |                                |  |                   |                         |                                 | # of Conf                             |  |  |
| Employee Name  |  |                     | (if known)             | Type of Reco                   | ord (s)  |                   | -                       |                                 | # of Copi                             | 35                                     |  |
|  |  |                     |                        |                                |  |                   | _                       |                                 | _                                     |  |  |
|  |  |                     |                        |                                |  |                   |                         | ****                            |                                       |  |  |
| Accesses to the second   |  |                     |                        |                                |  |                   |                         |                                 |                                       |  |  |
|  |  |                     |                        |                                |  |                   |                         |                                 |                                       |  |  |
|  |  |                     |                        |                                |  | VI                |                         |                                 |                                       |  |  |
|  |  |                     |                        |                                |  |                   |                         |                                 |                                       |  |  |
|  |  |                     |                        |                                |  |                   |                         |                                 |                                       |  |  |
|  |  |                     |                        |                                |  |                   |                         |                                 |                                       |  |  |

Written Directives (list below)

Other (describe below)

AIR UNIT ACCREDITATIONS
P-0929E REV 05-2010

DESCRIPTION OF REQUEST/OTHER RECORDS

Describe specific details of the request not listed above:

Photographs

☐ Video

Traffic Crash

☐ Audio

| FEE 8  | 8745                  |                                 |               |  |  |  |  |  |  |  |
|--|-----------------------|---------------------------------|---------------|--|--|--|--|--|--|--|
| RECORDS/SERVICES   | COST<br>PER<br>RECORD | QUANTITY<br>REQUESTED           | LINE TOTAL    |  |  |  |  |  |  |  |
| Record Search per Name †   | \$ 5.00 + services    |                                 |               |  |  |  |  |  |  |  |
| Traffic Crash, Offense, or Other Document  | \$ 0.15+              |                                 |               |  |  |  |  |  |  |  |
| (singled-sided copies) - per page†   | services              |                                 |               |  |  |  |  |  |  |  |
| Traffic Crash, Offense, or Other Document  | \$ 0.20 +             |                                 |               |  |  |  |  |  |  |  |
| (double-sided copies) - per page †   | services              |                                 |               |  |  |  |  |  |  |  |
| Fingerprints, per set/card †   | \$ 5.00 + services    |                                 |               |  |  |  |  |  |  |  |
| Photograph Copy 3 ½ x 5 †  | \$ 0.35 + services    |                                 |               |  |  |  |  |  |  |  |
| Photograph Copy 5 x 7 †  | \$ 0.85 + services    |                                 |               |  |  |  |  |  |  |  |
| Photograph Copy 8 x 12 or 8 x 10 †   | \$ 3.80 + services    |                                 |               |  |  |  |  |  |  |  |
| CD/DVD § †   | \$ 0.50 + services    |                                 |               |  |  |  |  |  |  |  |
| Services †   | \$                    |                                 |               |  |  |  |  |  |  |  |
|  | \$                    |                                 |               |  |  |  |  |  |  |  |
|  | \$                    |                                 |               |  |  |  |  |  |  |  |
|  | \$                    |                                 |               |  |  |  |  |  |  |  |
|  | \$                    |                                 |               |  |  |  |  |  |  |  |
|  | \$                    |                                 |               |  |  |  |  |  |  |  |
|  | \$                    |                                 |               |  |  |  |  |  |  |  |
| Deposit  |                       |                                 | s             |  |  |  |  |  |  |  |
|  | Total Fee Ov          | ved to the City of Jacksonville | \$            |  |  |  |  |  |  |  |
| Florida Statute 365.171 (12) provides that "any recordwhich reveals the name, address or telephone number of any person requesting emergency serviceby accessing 9-1-1is exempt from the provisions of FSS 119.07 (1) ExceptTo A Public Safety Agency".  The hourly rate includes the efforts of research, replication, review, and redaction, as applicable for any request that exceeds thirty (30) minutes to fulfill. In accordance with Florida law, hourly rates for units not using a standardized rate shall be charged at the actual rate (salary plus benefits) of the employee actually fulfilling the public records request. A listing of standardized labor rates will be provided upon request. |                       |                                 |               |  |  |  |  |  |  |  |
| Official Use Requests Only - Must  |                       | ed By a Lieutenant or High      | ner Authority |  |  |  |  |  |  |  |
| Approving Supervisor (Printed Name/Signature   | Date                  |                                 |               |  |  |  |  |  |  |  |
| Supervisor of Records Custodian - Review & Authorization of Records Release  |                       |                                 |               |  |  |  |  |  |  |  |
| Approving Supervisor (Printed Name/Signature   | Date                  |                                 |               |  |  |  |  |  |  |  |
| By releasing these requested records, the Approving Supervisor affirms that to the best of his knowledge, all records were released in accordance with law and all records have been redacted appropriately, if applicable.  REQUEST ACKNOWLEDGEMENT   |                       |                                 |               |  |  |  |  |  |  |  |
| Released To  | Date                  |                                 |               |  |  |  |  |  |  |  |
| Released by A.S. Holb  | Date: 12(1712012      |                                 |               |  |  |  |  |  |  |  |
| Comments: Please PRINT   |                       |                                 |               |  |  |  |  |  |  |  |

#### Holbert, Adria S.

From: DePiazza, Dorothy A.

Sent: Friday, November 30, 2012 3:50 PM
To: Holbert, Adria S.; Hutchinson, Sylvia L.

Cc: Ray, Terry A.

Subject: FW: Freedom of Information Request: Jacksonville, FL Sheriff Drone Documents

This is actually a public records request which was sent to A/C Ayoub. Please process it as a normal business routine.

----Original Message-----From: Ayoub, Andre E.

Sent: Friday, November 30, 2012 3:42 PM

To: DePiazza, Dorothy A.

Subject: FW: Freedom of Information Request: Jacksonville, FL Sheriff Drone Documents

----Original Message----

From: 2284-17955745@requests.muckrock.com [mailto:2284-17955745@requests.muckrock.com]

Sent: Friday, November 30, 2012 3:37 PM

To: Ayoub, Andre E.

Subject: Freedom of Information Request: Jacksonville, FL Sheriff Drone Documents

November 30, 2012 Jacksonville Sheriff's Office Jacksonville Sheriff's Office Central Records Unit 501 East Bay Street Jacksonville, FL 32202

#### To Whom It May Concern:

Pursuant to Florida's Sunshine Law (Fla. Stat. secs. 119.01 to 119.15 (1995)), I hereby request the following records:

- 1. any requests for proposals, proposals submitted by vendors, contracts, budgets or cost allocations for the purchase, research of and/or use of aerial drones, UAs, UAVs, and UASs (hereinafter "drones");
- 2. any policies, guidelines, manuals and/or instructions on institutional use of drones, including on the legal process required (such as a warrant or court order), if any, before operating a drone;
- 3. any departmental records concerning this institution's use of and/or research of drones now or plans to use drones in the future including:
- a. the types of investigations or instances in which this department is using or plans to use drones, or how it plans to support, manage or oversee the usage of drones by another department or office;

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b. policies, guidelines, manuals and/or instructions on storage requirements or procedures for video or static images obtained through use of drones, including retention times;

- c. the altitude at which drones can or do fly;
- d. drones' ability to carry weapons.

I also request that, if appropriate, fees be waived as I believe this request is in the public interest. The requested documents will be made available to the general public free of charge as part of the public information service at MuckRock.com, processed by a representative of the news media/press and is made in the process of news gathering and not for commercial usage.

In the event that fees cannot be waived, I would be grateful if you would inform me of the total charges in advance of fulfilling my request. I would prefer the request filled electronically, by e-mail attachment if available or CD-ROM if not.

Thank you in advance for your anticipated cooperation in this matter. I would request your response within ten (10) business days.

Sincerely,

Shawn Musgrave

Filed via MuckRock.com E-mail (Preferred): <u>2284-17955745@requests.muckrock.com</u>

For mailed responses, please address (see note): MuckRock News DEPT MR 2284 PO Box 55819 Boston, MA 02205-5819

PLEASE NOTE the new address as well as the fact that improperly addressed (i.e., with the requester's name rather than MuckRock News) requests might be returned by the USPS as undeliverable.